

*Department of Health and Human Services
Centers for Medicare & Medicaid Services
Center for Medicare & Medicaid Innovation
Grants to Support the Hispanic Health Services Research Grant Program
New Announcement
Catalog of Federal Domestic Assistance (CFDA) No. 93.779*

Fiscal Year 2012

**Funding Opportunity Number: CMS-1H0-12-001
Competition ID: CMS-1H0-12-001-014404**

Grants.gov Application Due Date: June 20, 2012

Mailed Application Due Date: June 20, 2012

Letters of Intent Due Date: May 25, 2012

Anticipated Award Date: September 30, 2012

Project/Budget Period: 24 Months

Authority: Section 1110 Social Security Act

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EXECUTIVE SUMMARY

HISPANIC HEALTH SERVICES RESEARCH GRANT PROGRAM

The Centers for Medicare & Medicaid Services (CMS) is announcing the availability of funds under its grant program to assist researchers in conducting health services research for 2012. The purpose of the Hispanic grant program is to implement Hispanic health services research activities to meet the needs of diverse CMS beneficiary populations. The grant program is designed to: 1) Encourage health services and health disparities researchers to pursue research issues which impact Hispanic Medicare, Medicaid, and CHIP health services issues, 2) conduct outreach activities to apprise Hispanic researchers of funding availability to conduct research-related issues affecting Hispanic communities to expand the pool of applicants applying for such grants, 3) assist CMS in implementing its mission focusing on health care quality and improvement for its beneficiaries, 4) support extramural research in health care capacity development activities for the Hispanic communities, 5) promote research that will be aimed at developing a better understanding of health care services issues pertaining to Hispanics, and 6) foster an network for communication and collaboration regarding Hispanic health care issues.

This grant program is consistent with the Executive Order 13555 White House Initiative on Educational Excellence for Hispanics (WHIEEHs) directing an interagency approach to developing, monitoring, and coordinating federal efforts to promote high-quality education for Hispanics. The Executive Order works to develop ways to maximize the effectiveness of Federal education initiatives within the Hispanic community. This program is one strategy to increase the participation, promotion, and professional development of investigators interested in Hispanic health disparities research.

Funding is available for grants to implement research related to health care delivery and health financing issues affecting Hispanics, including issues of access to health care, utilization of health care services, health outcomes, quality of services, cost of care, health disparities, socio-economic differences, cultural barriers, and activities related to health screening, prevention, outreach, and education.

To be eligible for grants under this program, applicants must meet one of the following three requirements in order to qualify for funding under this grant program: 1) A health services/disparities researcher at an university or college offering a Ph.D. or Master's Degree Program in one or more of the following disciplines Allied Health, Gerontology, Health Care Administration, Health Management, Nursing, Pharmacology, Public Health, Public Policy, Social Work; or 2) a member of a community-based health organization with a Hispanic health services research component; or 3) a member of a professional association focusing on Hispanic health services and health disparities issues.

Department of Health and Human Services

Centers for Medicare & Medicaid Services

Center for Medicare and Medicaid Innovation

Hispanic Health Services Research Grant Program

I. FUNDING OPPORTUNITY DESCRIPTION

1. Introduction

The Centers for Medicare & Medicaid Services (CMS) is announcing the availability of funds under its Hispanic Health Services Research Grant Program to inform researchers of funding opportunities to conduct health services research affecting Hispanics for 2012. This announcement seeks competitive applications for small applied research projects that relate to identifying and evaluating solutions for eliminating health disparities among Hispanics. Investigators should be associated with a university, college, community-based health organization, or a professional association that has a health services research component. Researchers are expected to become involved in the design, implementation, and operation of research projects that address health care issues such as financing, delivery, access, quality, and barriers affecting the Hispanics. CMS is seeking these types of research projects because of the importance in finding solutions to the many difficult health issues that have a significant impact on the health of Hispanics.

The White House Initiative on Educational Excellence for Hispanics issued a directive to increase the participation of Hispanics in federal education programs and services. This includes Hispanic-serving school districts, Hispanic Institutions, and other educational institutions for Hispanics. A Commission advises the President and the Secretary of Education on these issues. The grant program is consistent with the White House Initiative directing an interagency approach to developing, monitoring, and coordinating federal efforts to promote high-quality education for Hispanics. The Commission works to develop ways to maximize the effectiveness of Federal education initiatives within the Hispanic community.

The Commission is also charged with the development of a monitoring system that will measure and hold executive branch departments and agencies accountable for the coordination of federal efforts to ensure the participation of Hispanics in federal education programs. It will examine available research and information on the effectiveness of current practices at the local, state and federal levels in closing the educational achievement gap for Hispanics. The White House Initiative calls for a series of actions covering a broad scope of issues including health services research, conferences, service delivery, data collection, and customer service capability for Hispanics. CMS's Hispanic Health Services Research Grant Program is in accordance

with the White House Initiative on Educational Excellence for Hispanics. This program is one strategy to increase the participation, promotion, and professional development of investigators interested in Hispanic health services research.

2. CMS/Hispanic Partnership

CMS is committed to developing a partnership with Health Services and Health Disparities researchers focusing on Hispanic health issues to achieve the goals of the White House Initiative. CMS wants to make sure that Hispanic researchers are apprised of the opportunities to compete for its extramural research funds and gain a better understanding of its research interests. This announcement, the 2012 CMS Hispanic Health Services Research Grant Program, is related to the priority area of CMS's research programs for health care and financing issues in the Hispanic community. The announcement meets the Healthy People 2020 goals of eliminating disparities and addressing the Healthy People 2020 focus area of health communication.

3. Detailed Purposes of Grant Program

The purpose of this announcement is to implement Hispanic health services research activities to meet the needs of diverse CMS beneficiary populations. The goals of the Hispanic Health Services Research Grant Program are to:

- Encourage health services researchers to pursue research issues which impact Hispanic Medicare, Medicaid, and CHIP health services and health disparities issues;
- Conduct outreach activities to apprise Hispanic researchers of funding availability to conduct research-related issues affecting Hispanic communities to expand the pool of applicants applying for such grants;
- Assist CMS in implementing its mission focusing on health care quality and improvement for its beneficiaries;
- Support extramural research in health care capacity development activities for the Hispanic communities;
- Promote research that will be aimed at developing a better understanding of health care services issues pertaining to Hispanics; and
- Foster a network for communication and collaboration regarding Hispanic health care issues.

4. Health Issues of Concern

CMS is interested in the following types of applications:

- a) Applications that address research on disseminating information and improving health-related attitudes, knowledge, beliefs, and practices related to the following six health conditions:

- 1) Diabetes Mellitus
- 2) Cancer Screening and Management
- 3) Cardiovascular Disease
- 4) HIV/AIDS (Among Medicare or Medicaid Beneficiaries)
- 5) Adult and Childhood Immunizations
- 6) Infant Mortality

Other Population Specific Health Concerns

- 1) Asthma
- 2) Obesity
- 3) Mental Health

- b) Applications to research the effectiveness of programs designed to:
 - 1) Increase disease management, self management, disease prevention, and health promotion.
 - 2) Increase the use of preventive services (for example – colorectal, mammography, and prostate screening; children with asthma who are Medicaid recipients).
 - 3) Improve health outcomes among Medicare and/or Medicaid beneficiaries as these issues relate to the six health priority conditions and other population specific health concerns listed above.
 - 4) Remove barriers and improving access to health services.
 - 5) Reduce health disparities and socioeconomic differences in health services.
 - 6) Increase the efficient utilization of health services.
 - 7) Improve quality of care.
 - 8) Reduce health care costs.
 - 9) Promote care coordination between providers of services and minority beneficiaries.
 - 10) Support community based advisory health groups to improve health services for minority beneficiaries.

All applications should describe research to be conducted with relevance to the CMS Medicare, Medicaid, and CHIP programs and which area of Healthy People 2020 is served by this project.

5. Types of Studies

CMS is interested in supporting the following two types of studies.

- 1) **Educational Intervention Studies.** These studies will inform populations-at-risk about certain health problems especially as they relate to Hispanics. A follow-up plan should be developed to determine the effectiveness of the intervention. An example might include developing an educational program to enhance the awareness, knowledge, and understanding of Hispanics about prevention, treatment, services, and/or strategies for accessing the health care system. The project should reach a minimum of **350** participants.
- 2) **Developmental Intervention Studies.** These studies will develop promising new approaches to reducing disease, encouraging changes in health behavior, and promoting health among Hispanics. For example, using computers to disseminate health related information or testing the effectiveness of a health hotline in reducing health disparities. The project should reach a minimum of **350** participants.

6. Examples of Research Intervention Models

- 1) Educational Outreach
- 2) Train the Trainer
- 3) Community based organizations
- 4) Community health navigators
- 5) Community health workers
- 6) Community based case managers
- 7) Health Professional Networks

7. Technical Assistance

After award, limited technical assistance will be available to awardees on submitting data required for quarterly progress reports, providing comments on drafts and final reports and second year continuation reports to ensure that project activities fulfill the original intent of the grant, assisting with technical reporting requirements and closing out projects, assuring compliance with federal regulations, etc.

II. AWARD INFORMATION

1. Type of Award

The funds awarded for this grant program come from federal educational grants. CMS anticipates awarding a grant to one (1) institution for a 24-month project/budget period. This fiscal year CMMI will fully fund the Hispanic Serving Institutions (HSI) research project in 2012 for a full 24 months. In the past, CMMI funded the projects annually

(\$100,000 year 1 and \$100,000 year 2). CMS strongly encourages collaboration with a university/college, community-based health organization, a professional association, or a faith based organization. If an application was submitted in response to a prior year's announcement under this grant program, but was not funded, **a new application must be submitted**. In an effort to expand the number of awardees, awards to principal investigators (PI) will be limited to a maximum of two. If you received two or more awards in the past, you will be unable to apply for this application. However, you may serve as a consultant on an application.

2. Duration of Award

The anticipated period of performance for this grant award is September 30, 2012 through September 29, 2014. Funding will be awarded in a 24-month budget period.

3. Amount to Be Awarded

Eligible researchers may request \$200,000 to allow the FY 2012 HSI grants funds to be awarded for the 24 month budget period for a variety of health services research projects.

4. Number of Awards

CMS intends to award one grant for the Hispanic Health Services program.

5. Schedule of Processing

- Grants.gov Application Deadline – June 20, 2012
- Mailed Application Deadline – June 20, 2012
- Technical Panel Review – July 2012
- CMS Review - August 2012
- Announcement of Awards - September 2012

III. ELIGIBILITY INFORMATION

1. Eligible Applicants

Applicants must meet **one** of the following three requirements in order to qualify for funding under this grant program.

1. A health services/disparities researcher at a university or college offering a Ph.D. or Master's Degree Program in **one or more** of the following disciplines:

Allied Health
Gerontology
Health Care Administration
Health Management
Nursing

Pharmacology
Public Health
Public Policy
Social Work; **or**

2. A member of a community-based health organization with a Hispanic health services research component; **or**
3. A member of a professional association focusing on Hispanic health services and health disparities issues.

2. Cost Sharing/Matching

CMS' grant authority under section 1110 of the Social Security Act requires cost-sharing by applicants. To comply with this requirement, CMS is requiring that applicants provide cost-sharing equal to at least one (1) percent of the amount of the award. This cost-sharing requirement may be satisfied through in-kind contributions. **Applications that do not include Cost Sharing will not be considered for further review.**

3. Foreign and International Organizations

Foreign and International Organizations are not eligible to apply.

4. Faith Based Organizations

Faith Based Organizations are not eligible to apply.

IV. APPLICATION AND SUBMISSION INFORMATION

1. Address to Request Application Package

Application Standard Forms can be found at <http://www.cms.hhs.gov/GrantOpportunities/>. You may request an electronic application from the Project Officer. The applicant must submit the application electronically through grants.gov **AND** mail an original (bound), two copies (unbound), and a CD of the complete application to the CMS Grants Management Specialist listed below:

Linda Gmeiner, Grants Management Specialist
Centers for Medicare & Medicaid Services
Office of Acquisition and Grants Management
Division of Grants Management
Mail Stop B3-30-03
7500 Security Boulevard
Baltimore, MD 21244-1850

A complete electronic application package, including all required forms, is available at <http://www.grants.gov>. Standard application forms and related instructions are available online at <http://www.cms.hhs.gov/GrantOpportunities/and> <http://www.ssa.gov/oag/grants/current/opdr-07-1/add1%20assurances.doc>.

For assistance with the grants.gov online process including but not limited to the registration process, technical difficulties with completing the application, and password retrieval, please contact Grants.gov directly at 1-800-518-4726 or support@grants.gov.

2. Content and Form of Application Submission

The investigator must complete and submit an application package. If an application was submitted in response to a prior year's solicitation under this grant program, but was not funded, **a new application must be submitted**. The narrative portion of the application should not exceed 25 typewritten double-spaced pages. **Please ensure that the project narrative is page-numbered (1-25)**. Times New Roman with 12 Font should be used. While additional documentation may also be submitted, such materials should be limited to information relevant to the specific scope and purpose of the proposed project. Each application received from an eligible institution will be reviewed for merit by a panel of technical experts. Since CMS anticipates a large number of applications for each panel member to review, it is important that your application is concise, yet thorough.

The following items **should not be included in the Project Narrative portion of the application** and, therefore, should not be included in the 25 page limit:

- Standard Forms from the Application Forms Kit;
- Applicant's Title Page and Cover Letter;
- Letters of Agreement or Support;
- Resumes;
- Table of Contents;
- Project Abstract;
- Budget Narrative/Justification;
- Other Support Documents;
- Budget Forms; and
- Appendices.

a) Required Contents of the Application

A complete application should consist of the following materials organized in the sequence indicated. The sequence is as follows:

- Standard Forms from the Application Forms Kit;
- Applicant's Title Page and Cover Letter;
- A letter of endorsement from the President or an other official from the Institution;

- Budget Forms (424A);
- Budget Narrative/Justification;
- Table of Contents;
- Project Abstract;
- Project Narrative;
- Required Appendices - Attachments (e.g., Biographical Sketches and Resumes; Project Workplan; Letter of Agreement or Support; Memorandum of Understanding; and Institutional Review Board Information); and
- Supporting documentation

b) Cover Letter

The cover letter shall be addressed to Linda Gmeiner, Grants Management Specialist, and must include the principal investigator name; a brief description of the proposed project; targeted population; and contact information for your organization (**name, phone number, fax and e-mail address**). The letter must also include the names of all institutions collaborating in the project and indicate that the applicant institution has clear authority to perform the proposed activities and is capable of implementing this project. The cover letter shall be included in the application package and uploaded in Grants.gov.

c) Application Forms

The following Standard Forms (SF) must be completed with an original signature:

SF424: Official Application for Federal Assistance

SF424A: Budget Information Non Construction

SF424B: Assurances - Non-Construction Programs

SFLLL: Disclosure of Lobbying Activities

Key Contacts Form- please identify the Principal Investigator and fiscal person who is responsible for completing financial reports (i.e. SF-425 and PSC 272)

Applicants may obtain copies of these forms directly from the CMS Web site at: <http://www.cms.hhs.gov/GrantOpportunities/> with the exception of the Key Contacts form that you may devise in Word format.

d) Project Abstract

The application should include a single space (one-page) abstract. The abstract should address:

- 1) Statement of the Problem - Describe what the investigator wants to do and why - e.g. the problem that is being addressed - background, significance, and need, project purpose, goals and objectives, and relevance to CMS mission/programs (for example, Medicare, Medicaid, or SCHIP).

- 2) Methodology of the proposed project - How does the investigator intend to implement the project?
- 3) Ability to implement the research project - Discuss the implementation strategy and management plan (workplan).
- 4) Institutional structure and capabilities - Does the institution have the structure and capacity to conduct the research project?
- 5) Collaboration with a university/college, community-based health organization, or professional association - Describe the type and degree of collaboration.

e) Project Narrative

The 25 page project narrative should provide a concise and complete description of the proposed project. It should contain the information necessary for the review panelists to fully understand the project. It should cover all aspects of the project requirements (See criteria for writing the narrative page 15).

f) Budget Narrative/Justification and Resources

The applicant should provide a **detailed breakdown** of the aggregate numbers for the budget recorded on Standard Form 424 (SF 424) "Application for Federal Assistance," including allocations for each major set of activities or proposed tasks. The proposed budget should distinguish the proportion of grant funding designated for each activity. The budget must clearly identify what funds will be administered directly by the lead agency and what will be subcontracted to other partners. The designated lead agency is solely responsible for the fiscal management of the project.

Applicants must supplement Budget Form SF-424A with a Budget Narrative. The Budget Narrative must include a yearly breakdown of costs for the two-year grant period of performance. Specifically, the Budget Narrative should provide a detailed cost breakdown for each line item outlined in the SF-424A by year including a breakdown of costs for each activity/cost within the line item. The proportion of grant funding designated for each activity should be clearly outlined and justify the institutions readiness to receive funding through 2014 including complete explanations and justifications for the proposed grant activities. The budget must separate out funding that is administered directly by the awardee from any funding that will be subcontracted.

The following budget categories should be addressed (as applicable):

- Personnel

- NOTE: Consistent with section 203 of the Consolidated Appropriations Act, 2012 (P.L. 112-74) none of the funds appropriated in this law shall be used to pay the salary of an individual, through a grant or other extramural mechanism, at a rate in excess of Executive Level II (\$179,700).
- Fringe benefits
- Contractual costs, including subcontracts
- Equipment
- Supplies
- Travel
- Indirect charges. The total indirect costs shall **not exceed 8%** of the modified total direct costs exclusive of tuition and related fees, direct expenditures for equipment, and subgrants and contracts under the grant in excess of \$25,000.
- Other costs, including those not otherwise associated with training and education.

The Budget Narrative shall outline the strategies and activities of the program, and provide cost breakdowns for any subcontracts that will be implemented to achieve anticipated outcomes.

The Budget Narrative shall also clearly distinguish the funding source of any given activity/cost, as either Federal or Non-Federal. Applicants should pinpoint those costs funded through in-kind contributions. Applicants must include detailed salary and fringe benefit costs for staff dedicated to the project through an in-kind contribution, to include yearly salary costs and the percentage of time dedicated to the project (for any given year).

The total budget for each award should include **both direct and indirect costs**. The total indirect costs **should not exceed 8%** of the modified total direct costs exclusive of tuition and related fees, direct expenditures for equipment, and subgrants and contracts under the grant in excess of \$25,000.

g) Appendices

- Key Staff Qualifications - Include a biographical sketch or resume of key staff members describing their qualifications. This form can be found at: http://www.cms.hhs.gov/GrantOpportunities/Downloads/01_biosketch.pdf
- Project Work Plan/Timeline: Include a detailed project work plan and timeline.
- Letters of Agreement, Endorsement, or Support - Provide a set of endorsements from collaborating organizations outlining their contributions, roles, and responsibilities relative to the projects and commitments that have been pledged for the proposed project. Include individual letters of support as appropriate.
- Memoranda of Understanding - Include documentation reflecting the collaborative relationships between relevant institutions.

- Institutional Review Board Approval - Include the outcome of their request for Institutional Review Board approval.

h) Supporting Documentation

NOTE: If the application does not comply with the guidelines in the Announcement (proper format, table of contents, executive summary, etc.) it will not be considered for further review.

Acceptable applications, i.e. those that meet the above criteria, will be reviewed using the procedures as described.

3. Submission Dates and Times

You must submit your application electronically through Grants.gov no later than 5 PM EST (Baltimore, MD) on June 20, 2012. Applications submitted through Grants.gov constitute electronically signed applications. The registration and E-Authorization process establishes the Authorized Organization Representative (AOR). When you submit the application through Grants.gov, the name of your representative on file will be inserted into the signature line of the application. Applicants must register the individual who is able to make legally binding commitments for the applicant organization as the AOR.

The applicant must submit the application electronically through grants.gov **AND** mail an original (bound), two copies (unbound), and a CD of the complete application to the CMS Grants Management Specialist. Hard copies of the original application should be signed by the University President or other official having authority to legally bind the institution to the performance of a grant. **The original should be bound and the two copies should be unbound. Please do not use staples. Send a CD Rom with the complete application.** Mail the original, two copies of the application, and a CD Rom to:

Centers for Medicare & Medicaid Services
Office of Acquisition and Grants Management
Division of Grants Management
Attn: Linda Gmeiner, Grants Management Specialist
Mail Stop B3-30-03
7500 Security Boulevard
Baltimore, Maryland 21244-1850

The mailed application shall be received on or before **5 PM EST (Baltimore, MD) on June 20, 2012**.

Or

Hand deliver the original and two copies of the application by **5 PM EST (Baltimore, MD) on June 20, 2012 to the above location.**

To expedite the receipt of your application, you are strongly urged to send it by Federal Express or Express Mail. All mailed applications must be received on or before 5 PM EST (Baltimore, MD) on June 20, 2012. Upon receipt of an application, the Office of Acquisition and Grants will email a notification of receipt to the institution. If an institution fails to receive the notification of receipt within 15 days from the date of mailing the application, the institution should call Linda Gmeiner at 410-786-9954.

Late applications: Any application that is received after the due date and time will be deemed a “late application.” Those institutions submitting a late application will be notified (upon request) that the application was not considered in the competition.

Letter of Intent

Applicants are encouraged to submit a Letter of Intent (LOI). However, LOIs are not required and an applicants’ submission or failure to submit a LOI has no bearing on the scoring of applications received. LOIs enable CMS to better plan for the application review process.

Prospective applicants choosing to submit an LOI are asked to submit by May 25, 2012. The LOI should include a title and description of the proposed project, address, and telephone number of the investigator(s), the identities of other key personnel, and the names of participating institutions. The LOI should not exceed one page. The information received from the LOI allows CMS to estimate the potential review workload and facilitates planning for the review process.

The LOI should be emailed to Dr. Richard Bragg, Project Officer at Richard.Bragg@cms.hhs.gov.

4. Intergovernmental Review

This grant is not subject to Executive Order 12372 concerning “Intergovernmental Review of Federal Programs.”

5. Funding Restrictions

a) Grant funds may be used for any of the following:

- Personnel costs, which may include project support staff and contracts for collaboration.
- Costs of data collection and transmission.
- Travel costs as they pertain to the administration and conduct of the grant.
- Training cost for program participants.

- Indirect costs should not exceed **8%** of the modified total direct costs exclusive of tuition and related fees, direct expenditures for equipment, and subgrants and contracts under the grant in excess of \$25,000.

b) Grant funds may not be used for any of the following:

- To provide direct services to individuals except as explicitly permitted under the grant solicitation.
- To match any other Federal funds.
- To provide services, equipment, or supports that are already the legal responsibility of another party under Federal law.

6. Other Submission Requirements

- All applicants under this announcement must have an Employer Identification Number (EIN), otherwise known as a Taxpayer Identification Number (TIN), to apply. **Please note, the time needed to complete the EIN/TIN registration process is substantial, and applicants should therefore begin the process of obtaining an EIN/TIN immediately to ensure this information is received in advance of application deadlines.**
- All applicants must have a Dun and Bradstreet (D&B) Data Universal Numbering System (DUNS) number. The DUNS number is a nine-digit identification number that uniquely identifies business entities. Obtaining a DUNS number is easy and free. To obtain a DUNS number, access the following website: <http://www.dnb.com/> or call 1-866-705-5711. This number should be entered in the block 8c (on the Form SF-424, Application for Federal Assistance). The organization name and address entered in block 8a and 8e should be exactly as given for the DUNS number. **Applicants should obtain this DUNS number immediately to ensure all registration steps are completed in time.**
- The applicant must also register in the Central Contractor Registration (CCR) database in order to be able to submit the application. **Applicants should begin the CCR registration process immediately to ensure that it does not impair your ability to meet required submission deadlines.**
- Authorized Organizational Representative: The Authorized Organizational Representative (AOR) who will officially submit an application on behalf of the organization must register with Grants.gov for a username and password. AORs must complete a profile with Grants.gov using their organization's DUNS Number to obtain their username and password. http://grants.gov/applicants/get_registered.jsp. AORs must wait at least one business day after registration in CCR before entering their profiles in Grants.gov. **Applicants should complete this process as soon as possible after successful registration in CCR to ensure this step is completed in time to apply before application deadlines.**

- When an AOR registers with Grants.gov to submit applications on behalf of an organization, that organization's E-Biz point-of-contact will receive an email notification. The email address provided in the profile will be the email used to send the notification from Grants.gov to the E-Biz point of contact (E-Biz POC) with the AOR copied on the correspondence.
- The E-Biz POC must then login to Grants.gov (using the organization's DUNS number for the username and the special password called "M-PIN") and approve the AOR, thereby providing permission to submit applications.
- The AOR and the DUNS must match. If your organization has more than one DUNS number, be sure you have the correct AOR for your application.
- **Any files uploaded or attached to the Grants.gov application must be PDF file format and must contain a valid file format extension in the filename.** Even though Grants.gov allows applicants to attach any file format as part of their application, CMS restricts this practice and only accepts PDF file format. **Any file submitted as part of the Grants.gov application that is not in a PDF file format, or contains password protection, will not be accepted for processing and will be excluded from the application during the review process.** In addition, the use of compressed file formats such as ZIP, RAR or Adobe Portfolio will not be accepted. The application must be submitted in a file format that can easily be copied and read by reviewers. It is recommended that scanned copies not be submitted through Grants.gov unless the applicant confirms the clarity of the documents. Pages cannot be reduced resulting in multiple pages on a single sheet to avoid exceeding the page limitation. All documents that do not conform to the above will be excluded from the application during the review process.
- After you electronically submit your application, you will receive an automatic email notification from Grants.gov that contains a Grants.gov tracking number. **Please be aware that this notice does not guarantee that the application will be accepted by Grants.gov. It is only an acknowledgement of receipt.** All applications that are successfully submitted must be validated by Grants.gov before they will be accepted. Please note applicants may incur a time delay before they receive acknowledgement that the application has been validated and accepted by the Grants.gov system. In some cases, the validation process could take up to 48 hours. If for some reason your application is not accepted, then you will receive a subsequent notice from Grants.gov citing that the application submission has been rejected. **Applicants should not wait until the application deadline (date and time) to apply because notification by Grants.gov that the application fails validation and is rejected may not be received until close to or after the application deadline, eliminating the opportunity to correct errors and resubmit the application. Applications that fail validation and are rejected by Grants.gov after the deadline will not be accepted and/or granted**

a waiver. For this reason CMS recommends submission of applications prior to the due date and time.

- The most common reasons why an application fails the validation process and is rejected by Grants.gov are:
 - CCR registration cannot be located and validated
 - CCR registration has expired
 - The AOR is not authorized by the E-Biz POC to submit an application on behalf of the organization
 - File attachments do not comply with the Grants.gov file attachment requirements
- **HHS retrieves applications from Grants.gov only after Grants.gov validates and accepts the applications. Applications that fail validations and are rejected by Grants.gov are not retrieved by HHS, and HHS will not have access to rejected applications.**
- After HHS retrieves your application from Grants.gov, you will receive an email notification from Grants.gov stating that the agency has received your application and once receipt is processed, you will receive another email notification from Grants.gov citing the Agency Tracking Number that has been assigned to your application. It is important for the applicant to keep these notifications and know the Grants.gov Tracking Number and Agency Tracking Number associated with their application submission.
- Each year organizations and entities registered to apply for Federal grants and cooperative agreements through Grants.gov will need to renew their registration with the Central Contractor Registry (CCR). You can register with the CCR online; registration will take about 30 minutes to complete <http://www.ccr.gov/>. **Failure to renew CCR registration prior to application submission will prevent an applicant from successfully applying.**
- Grants.gov complies with Section 508 of the Rehabilitation Act of 1973. If an individual uses assistive technology and is unable to access any material on the site including forms contained with an application package, they can email the Grants.gov contact center at support@grants.gov or call 1-800-518-4726.

7. CCR Requirements

CCR UPDATE:

The Central Contractor Registration (CCR) is transitioning to the System for Award Management (SAM). Grants.gov uses CCR registration as a step in the application process.

How does the transition impact new registrants?

CCR will not process any new registrations on Thursday (May 24, 2012), Friday (May 25, 2012), over that weekend, or on Memorial Day, Monday (May 28, 2012). If a new registrant who is trying to apply for a grant on Grants.gov is not active in CCR by Wednesday (May 23, 2012), their active status will not appear in Grants.gov prior to SAM going live on May 29, 2012.

How will the transition impact current registrants?

If your current registration is set to expire between May 15, 2012 and July 15, 2012, the expiration date will be extended by 90 days. You will receive an e-mail notification from CCR when the expiration date is extended. You will receive standard e-mail reminders once SAM goes live to update your record based on this new expiration date. Those e-mail notifications will come from SAM.

For any organization not currently registered with CCR and DUNS, the CCR/DUNS process should begin as soon as possible as the process can take a significant period of time to complete. All prime awardees must provide a Dun and Bradstreet (D&B) Data Universal Numbering System (DUNS) number and an EIN/TIN number in order to be able to register in the Federal Funding Accountability and Transparency Subaward Reporting System (FSRS) as a prime award user. If your organization does not have a DUNS number, you will need to obtain one from Dun & Bradstreet. Call D&B at 866-705-5711 if you do not have a DUNS number. Once you have obtained a DUNS Number from D&B, you must then register with the Central Contractor Registration (CCR) at <http://www.ccr.gov/>. Prime awardees must maintain current registration in the Central Contractor Registration (CCR) database. Prime awardees may make sub-awards only to entities that have DUNS numbers. Organizations must report executive compensation as part of the registration profile at <http://www.ccr.gov/> by the end of the month following the month in which this award is made, and annually thereafter (based on the reporting requirements of the Federal Funding Accountability and Transparency Act (FFATA) of 2006 (Pub. L. 109-282)), as amended by section 6202 of Public Law 110-252 and implemented by 2 CFR Part 170)). After you have completed your CCR registration, you will be able to register in FSRS as a prime awardee user.

V. APPLICATION REVIEW INFORMATION**1. Criteria**

CMS will use the following criteria to evaluate all applications for inclusion in the program. The total score for the evaluation is 100 points.

To assist applicants in preparing the application and to aid the technical panel in its review, the narrative portion of the application should be written using the following format:

- Statement of the Problem
- Methodology
- Ability to Implement the Research Project
- Institutional Structure and Capabilities
- Collaboration with a university/college, community-based health organization, professional association, or faith based organization.

The panel reviewers shall score the application based on the following.

a) Statement of the Problem

The application must demonstrate that the applicant has a thorough understanding of the specific health problem(s) within the target population and the strategies required to address the problem(s) identified. The applicant should clearly describe the proposed project explaining what the researcher plans to do and why. This section of the application must describe the:

- Background, significance, and need for the project
- Project purpose, goals, and objectives
- Relevance of the project to CMS's mission/programs. How will the project improve the overall health outcomes and quality of care, reduce health disparities, and achieve savings for the targeted population (Medicare, Medicaid, or CHIP programs)?
- Supporting research materials/Review of Literature

Panel scoring: 20 Maximum Points

b) Methodology

The applicant should explain how the research team intends to implement the project. The applicant should make a complete and concise presentation of the methodology that will be implemented in this project. The proposal should provide clear and convincing evidence and supporting materials that are appropriate for the project, likely to improve quality of care and reduce health disparities for the targeted population. Any innovative features of the proposed project should be highlighted. The application must include:

- Study design and intervention strategies (**Include in appendix brief samples of focus group guides and questionnaires to be used**)
- Hypotheses/research questions
- Data collection and data analysis plan as appropriate
- Target population and setting
- Expected outcomes

- A plan for evaluation of the project
- Information about the Institutional Review Board (IRB) Approval **(Include in appendix a sample of the letter of approval or information to be submitted to the IRB)**

Panel scoring: 30 Maximum Points

c) Ability to Implement the Research Project

The applicant should provide detailed information to demonstrate their technical understanding and capability of performing the requirements of the project, including:

- A detailed implementation strategy and plan that includes a management plan (workplan) describing tasks, responsible individuals, timelines, and costs. **A timetable of not more than 24 months with specific key actions and milestones should be included in the appendix.**
- The capabilities/responsibilities of all personnel and a description of how the personnel will be organized, to whom they will report, and their role in accomplishing the goals and objectives and components of the project.

Panel scoring: 20 Maximum Points

d) Institutional Structure, Capabilities, and Budget Submission

The applicant should demonstrate clear and convincing evidence that the institution has the organizational infrastructure and management capacity to conduct the research project effectively, including:

- Evidence of the availability and adequacy of the facilities, equipment, and financial management systems to conduct the project
- A plan for budget and performance monitoring **(How does the PI plan to monitor the budget?)**
- Protocols to guide the administrative aspects of the project **(How does the PI plan to interact with the Office of Sponsored Programs, Grants Office, Contracts Office to administer the project?)**

In addition, the proposed budget and budget narrative are carefully developed and reflect efficient and reasonable use of funds. Overhead and administrative costs are reasonable, with funding focused on operations rather than administration. The proposed budget request reflects a

promising investment given the expected impact of the health services research activities.

The evaluation will consider whether the applicant possesses the organizational infrastructure and management capacity to conduct the research project, as well as a comprehensive budget reflecting all costs of staffing for implementing the health services research activities.

Panel scoring: 15 Maximum Points

e) Collaboration with a University/College, Community-Based Health Organization, Professional Association, or Faith Based Organization

The applicant should describe the types and degrees of the collaborative relationships supporting the proposed research project that have been established or that may be established between the applicant institution and other institutions or community-based health organizations. This description should include specific information about the roles and responsibilities of each collaborator on the project. Letters of support from collaborating organizations outlining their contributions, roles, and responsibilities relative to the research project should be included in the proposal. **Include letters of support in the appendix.** Collaborating organizations may include the following:

- Community-Based Health Organizations
- Faith-based Organizations
- Social Organizations

Panel scoring: 15 Maximum Points

2. Review and Selection Process

Applications will be screened to determine eligibility for further review using the criteria detailed in this solicitation. Applications received late or that fail to meet the eligibility requirements as detailed in the solicitation or do not include the required forms will not be reviewed.

An independent review will be conducted by a panel of experts. The panel will conduct an independent, objective review of all responsive applications. The panelists will assess each application based on the review criteria to determine the merits of the proposal and the extent to which it furthers the purposes of the research program. The panelists' comments and recommendations will be condensed into a summary statement that will assist CMS in making the final award decisions. CMS will use the information to judge the likelihood that the project will be successfully implemented and will have tangible, beneficial outcomes.

3. Anticipated Announcement and Award Dates

The applicant will receive written notification of the award decision. Awards will be made to successful applicants before September 30, 2012.

VI. AWARD ADMINISTRATION INFORMATION

1. Award Notices

The award decision will be made by the Director and Senior staff members, Center for Medicare and Medicaid Innovation, Centers for Medicare & Medicaid Services, after consideration of the comments and recommendations of the technical review panelists and availability of funds. CMS reserves the right to determine which qualified applications will receive funding under this program. Technical assistance will be made available post award to the awardee.

The successful applicant will receive an official Notice of Award (NOA), signed by the CMS Grants Officer that will set forth the amount of the award and other pertinent information, along with a set of Terms and Conditions for fulfillment of the grant specifically applicable to the applicant. The NOA is a legal document issued to notify the grantee that an award has been made and that funds may be requested from the HHS Payment Management System (PMS). Any communication between CMS and awardees prior to issuance of the NoA is not an authorization to begin implementation of a project. Unsuccessful applicants will be notified by letter, sent through the U.S. Postal Service to the applicant organization as listed on its SF-424.

2. Administrative and National Policy Requirements

General Terms and Conditions for these grants are available for reference on our website at <http://www.cms.hhs.gov/ResearchDemoGrantsOpt/>. In addition to the General Terms and Conditions, **applicants should be aware that they may be required to comply with Special Terms and Conditions that will apply specifically to the proposal.** These special terms and conditions are used to clarify particular grant activities and assure that grant funding is being used in a permissible manner.

All Grantees receiving awards under this grant program must meet the requirements of:

Title VI of the Civil Rights Act of 1964;
Section 504 of the Rehabilitation Act of 1973;
The Age Discrimination Act of 1975;
Hill-Burton Community nondiscrimination provisions; and
Title II, Subtitle A, of the Americans with Disabilities Act of 1990.

All equipment, staff, other budgeted resources, and expenses must be used exclusively for the project identified in the awardee's original grant application or agreed upon subsequently with HHS, and may not be used for any prohibited uses.

3. Terms and Conditions

In accordance with the FY2012 Appropriations Provision, Department of Health and Human Service (HHS) recipients must comply with all terms and conditions outlined in their grant award, including grant policy terms and conditions contained in applicable HHS Grants Policy Statement, and requirements imposed by program statutes and regulations and HHS grant administration regulations, as applicable; as well as any requirements or limitation in any applicable appropriations acts.

General Terms, Special Terms, and Program Specific Terms and Conditions may accompany the Notice of Award. Potential awardees should be aware that special requirements could apply to awards based on the particular circumstances of the effort to be supported and/or deficiencies identified in the application by the HHS review panel. The General Terms and Conditions that are outlined in Section II of the HHS GPS will apply as indicated unless there are statutory, regulatory, or award-specific requirements to the contrary (as specified in the Notice of Award).

4. Reporting

- a) Grantees must agree to fully cooperate with any Federal evaluation of the program and provide quarterly or semi-annually any financial reports in a form prescribed by CMS (including the SF425, Federal Financial Report forms). These reports will be designed to outline how grant funds were used and to describe program progress, as well as barriers and measurable outcomes. CMS will provide a format for reporting in the terms and conditions.
- b) In order for CMS to monitor awardees efforts toward reaching the goals of the grant program awardees must agree to provide CMS with information it may require to assess the functioning and effectiveness of the program and to ensure that the grant monies are expended for the purposes for which they were awarded. The awardee must submit the following required reports throughout the period of performance: 1) quarterly progress reports, 2) annual report, and 3) final report. CMS will provide the format for these reports in the terms and conditions.

5. Federal Financial Report

Awardees will be required to submit the SF-425 Federal Financial Report on an annual, semi-annual, or quarterly basis. More details will be outlined in the Notice of Award Terms and Conditions.

6. Transparency Act Reporting Requirements

New awards issued under this funding opportunity announcement are subject to the reporting requirements of the Federal Funding Accountability and Transparency Act of 2006 (Pub. L. 109–282), as amended by section 6202 of Public Law 110–252 and

implemented by 2 CFR Part 170. Grant and cooperative agreement recipients must report information for each first-tier sub-award of \$25,000 or more in Federal funds and executive total compensation for the recipient's and sub-recipient's five most highly compensated executives as outlined in Appendix A to 2 CFR Part 170 (available online at www.fsrs.gov). Competing Continuation awardees may be subject to this requirement and will be so notified in the Notice of Award.

7. Audit Requirements

Awardees must comply with the audit requirements of Office of Management and Budget (OMB) Circular A-133. Information on the scope, frequency, and other aspects of the audits can be found on the Internet at www.whitehouse.gov/omb/circulars.

8. Payment Management Requirements

Awardees must submit a semi-annual electronic SF-425 via the Payment Management System and to the CMS Office of Acquisition and Grants Management. The report identifies cash expenditures against the authorized funds for the grant. Failure to submit the report may result in the inability to access funds. The SF-425 Certification page should be faxed to the Payment Management System contact at the fax number listed on the SF-425, or it may be submitted to:

Division of Payment Management
HHS/ASAM/PSC/FMS/DPM
PO Box 6021
Rockville, MD 20852
Telephone: (877) 614-5533

VII. AGENCY CONTACTS

Questions concerning this grant program are encouraged. Requests to clarify any issues from potential applicants are welcome. Please contact:

Richard Bragg, Ph.D.
Project Officer
Centers for Medicare & Medicaid Services
Center for Medicare & Medicaid Innovation
Mail Stop WB-06-05
7500 Security Boulevard
Baltimore, Maryland 21244-1850
(410) 786-7250
e-mail – Richard.bragg@cms.hhs.gov

Direct inquiries regarding grant procedures, fiscal matters, or guidance in completing the application forms to:

Centers for Medicare & Medicaid Services
Office of Acquisition and Grants Management
Division of Grants Management
Attn: Linda Gmeiner, Grants Management Specialist
Mail Stop B3-30-03
7500 Security Boulevard
Baltimore, Maryland 21244-1850
(410) 786-9954
e-mail – Linda.Gmeiner@cms.hhs.gov

VIII. OTHER INFORMATION

- **Executive Order 13410** (August 22, 2006) ~ “Promoting Quality and Efficient Health Care in Federal Government Administered or Sponsored Health Care Programs”

EO 13410 is applicable to health care providers, health plans, or health insurance issuers. It states that as each provider, plan, or issuer implements, acquires, or upgrades health information technology systems, it shall utilize, where available, health information technology systems and products that meet recognized interoperability standards. “Interoperability” means the ability to communicate and exchange data accurately, effectively, securely, and consistently with different information technology systems, software applications, and networks in various settings, and exchange data such that clinical or operational purpose and meaning of the data are preserved and unaltered.

- **Meetings** - Applicants must include in their application a provision for attendance for up to two project members to attend two research meetings sponsored by CMS.
- **Limitation** - One objective of the Hispanic Health Services Research Grant Program is to conduct outreach activities to apprise Hispanic researchers of funding availability to conduct research related issues affecting Hispanic communities to expand the pool of applicants applying for such grants. In an effort to expand the number of awardees, awards to principal investigators (PI) will be limited to a maximum of two. If you received two or more awards in the past, you will be unable to apply for this application. However, you may serve as a consultant on an application.
- **Published Reports** - If your application is awarded, the **grantee will be required to submit an article to a refereed journal** describing the findings of the study. All published reports, both formal and informal, should acknowledge grant support with the following footnote "This project was supported with funding from the Centers for Medicare & Medicaid Services." The article must also state the following: *The statements contained in this report are solely those of the authors and do not necessarily reflect the views or policies of the Centers for*

*Medicare & Medicaid Services. The grantee assumes responsibility for the accuracy and completeness of the information contained in this report. **Before submitting a manuscript or a publication, the principal investigator must consult with the CMS Project Officer. When a manuscript resulting from this grant is accepted for publication, the principal investigator must promptly notify the CMS Project Officer of its acceptance and the date it is scheduled to be published.*** The awardee is also required to participate in CMS sponsored research conferences. At these conferences, the awardee will present preliminary and/or final results of his/her study.